

RE 349 (New 12-10)

RECORD OF ATTENDANCE

NAME OF SPONSOR		DRE ISSUED 4-DIGIT SPONSOR NUMBER	
COURSE TITLE	LOCATION OF COURSE PRESENTATION		CREDIT HOURS
NAME OF PARTICIPANT	LICENSE ID NUMBER	COURSE REGISTRATION DATE	

ATTENDANCE VERIFICATION

<i>Date</i>	<i>Time In</i>	<i>Time Out</i>	<i>Total Time</i>
Total Time Attended			

CERTIFICATION

I have read and concur that the above is an accurate account of my attendance. I have also received written information describing Sponsor's refund policies regarding fees and cancellation of offering by Sponsor.

SIGNATURE OF PARTICIPANT ➤		DATE
MAILING ADDRESS		
BUSINESS TELEPHONE NUMBER ()		RESIDENCE TELEPHONE NUMBER ()
ABOVE INFORMATION VERIFIED BY: <i>(PRINT NAME OF SPONSOR OR SPONSOR'S AUTHORIZED MONITOR)</i>		
SIGNATURE OF MONITOR ➤		DATE

Note: This form must be retained in the sponsor's records for a period of five (5) years from the date attended per Commissioner's Regulation 3012.2.

**SAMPLE
RECOMMENDED DOCUMENT**